

COVID-19 Vaccine Information Brief

October 1, 2021

Changes to the document from the previous version are highlighted in yellow.

IMPORTANT/NEW COVID-19 Vaccine Information

- COVID-19 Primary Vaccination
- Definition of Fully Vaccinated
- Updated Interim Clinical Considerations for Use of COVID-19 Vaccines
- COVID-19 Vaccination for Pregnant People to Prevent Serious Illness, Deaths, and Adverse Pregnancy Outcomes from COVID-19

COVID-19 Primary Vaccination

Getting people vaccinated with a COVID-19 primary vaccine series remains the highest priority and is fundamental to reducing COVID-related morbidity and mortality. **All COVID-19 vaccines currently approved or authorized in the United States remain effective against severe disease, hospitalization and death.** Persons of all ages who have received a primary vaccine series are much less likely than unvaccinated persons to become infected with SARS-CoV-2 and to require hospitalization or die because of COVID-19.

Definition of Fully Vaccinated

For public health purposes, a person is considered fully vaccinated against COVID-19 ≥ 2 weeks after receipt of the second dose in a 2-dose series (Pfizer and Moderna) or ≥ 2 weeks after receipt of the single dose Janssen (J&J) vaccine.

Interim Clinical Considerations for Use of COVID-19 Vaccines

CDC released updated clinical guidance related to COVID-19 vaccines. The updated guidance can be found at [Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States | CDC](#).

Summary of recent changes (last updated September 15, 2021):

- Updated information in the section on [COVID-19 vaccination and SARS-CoV-2 infection](#)
- Updated information in the section on [Vaccinating people with a known COVID-19 exposure or during COVID-19 outbreaks](#)
- New section on [Vaccinating people receiving medical care unrelated to COVID-19](#)
- New section on [Vaccinating people undergoing SARS-CoV-2 screening](#)

COVID-19 Vaccination for Pregnant People to Prevent Serious Illness, Deaths, and Adverse Pregnancy Outcomes from COVID-19

CDC recommends urgent action to help protect pregnant people and their fetuses/infants. CDC recommends urgent action to accelerate primary vaccination for people who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future. Efforts should specifically address populations with lower vaccination coverage and use approaches to reduce racial and

ethnic disparities. CDC recommends ensuring tailored, culturally responsive, and linguistically appropriate communication of vaccination benefits. In addition, pregnant people should continue to follow all recommended prevention measures and should seek care immediately for any symptoms of COVID-19. Healthcare providers should have a low threshold for increased monitoring during pregnancy due to the risk of severe illness.

Resources

- [COVID-19 Vaccines While Pregnant or Breastfeeding](#)
 - [COVID-19 Vaccines for People Who Would Like to Have a Baby](#)
 - [COVID-19 among Pregnant and Recently Pregnant People](#)
 - [COVID Data Tracker](#)
 - [Vaccination Among Pregnant People](#)
 - [Data on COVID-19 during Pregnancy: Severity of Maternal Illness](#)
 - [Toolkit for Pregnant People and New Parents](#)
 - [Building Confidence in COVID-19 Vaccines](#)
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Pfizer Booster Dose Recommends for Adults 65+ and Specific At-Risk Groups

CDC's independent advisory committee, the Advisory Committee on Immunization Practices (ACIP) voted to recommend a booster dose of Pfizer's mRNA COVID-19 vaccine in certain populations. *It's important to note individuals can self-attest and receive the additional dose wherever vaccines are offered.*

CDC recommends:

- People 65 years and older and residents in long-term care settings *should* receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series.
- People aged 50–64 years with underlying medical conditions *should* receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series.
- People aged 18–49 years with underlying medical conditions *may* receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series, based on their individual benefits and risks.
- People aged 18–64 years who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting *may* receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series, based on their individual benefits and risks.

These recommendations are ONLY for those who originally received two-dose series of Pfizer's COVID vaccine in the primary series. Booster doses may be recommended in the future for those who received COVID vaccines manufactured by Moderna or Janssen (Johnson & Johnson), or those who received a different mRNA vaccine for each dose in the primary series, but ACIP did not address these situations. **CDC will also evaluate with similar urgency available data in the coming weeks to swiftly make additional recommendations for other populations or people who got the Moderna or Johnson & Johnson vaccines.**

As a reminder, providers are responsible for adhering to all requirements outlined in the COVID-19 Vaccination Program Provider Agreement. Specifically, providers must administer COVID-19 vaccines in accordance with all program requirements and recommendations of CDC, the Advisory Committee on Immunization Practices, and the U.S Food and Drug Administration (FDA). This applies to both EUA and FDA approved COVID-19 vaccines. Accordingly, use of these products outside of those that have been approved and authorized by FDA (often referred to as "off-label use") is not recommended. It would violate the provider agreement and could expose providers to the following risks:

- Administration of the product off label may not be covered under the PREP Act or the PREP Act declaration; therefore, providers may not have immunity from claims.

- Individuals who receive an off-label dose may not be eligible for compensation under the Countermeasures Injury Compensation Program after a possible adverse event.
 - CDC has defined the scope of the CDC COVID-19 Vaccination Program in terms of how the USG-provided vaccines may be used in the program. Providers giving off-label doses would be in violation of the CDC Program provider agreement potentially impacting their ability to remain a provider in the CDC program.
 - Administration fees may not be reimbursable by payers.
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ACIP Authorizes Additional Vaccine Dose (3rd Dose) for Certain Immunocompromised Individuals

Currently, CDC is recommending moderately to severely immunocompromised people receive an additional dose of COVID-19 vaccine. The third dose should be the same product as the initial 2-dose mRNA COVID-19 primary vaccine series. **The third dose recommendation only applies to mRNA COVID-19 vaccines (Moderna and Pfizer), and does not include Johnson & Johnson's Janssen COVID-19 vaccine.**

It's important to note that individuals can self-attest and receive the additional dose wherever vaccines are offered.

Moderately to severely immunocompromised people include:

- Active treatment for solid tumor and hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of CAR-T-cell or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids (i.e., ≥ 20 mg prednisone or equivalent per day), alkylating agents, antimetabolites, transplant-related immunosuppressive drugs, cancer chemotherapeutic agents classified as severely immunosuppressive, tumor-necrosis (TNF) blockers, and other biologic agents that are immunosuppressive or immunomodulatory.

Below is a list of resources related to the third dose recommendation:

- CDC [web page](#) for consumers
 - CDC [web page](#) for healthcare providers
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Updated Guidance on Coadministration of COVID-19 Vaccine With Other Vaccines

COVID-19 vaccines and other vaccines may be coadministered without regard to timing. **If a patient is eligible, both the flu and COVID-19 vaccines can be administered at the same visit, as recommended by CDC and the Advisory Committee on Immunizations Practices (ACIP). In addition to the flu vaccine, the COVID-19 vaccine can be given at the same time as other vaccines.** Giving all vaccines for which a person is recommended to receive at the same visit is considered a best practice as it increases the probability people will be up to date on recommended vaccines. It also is an important part of immunization practice, especially if a health care provider is uncertain the patient will return for additional doses of vaccine. Both COVID-19 and flu vaccines have been shown to reduce illness, hospitalizations, and deaths.

CDC has extensive guidance for health care providers on [coadministration of vaccines](#).

- When administering COVID-19 and flu vaccines during the same clinical visit, two different injection sites should be used, at least one inch apart from each other.
 - If COVID-19 vaccines are administered at the same time as flu vaccines which might be more likely to cause a local injection site reaction (e.g., adjuvanted or high-dose inactivated influenza vaccines), the two should be administered in different limbs, if possible.
 - [Interim Clinical Considerations for Use of COVID-19 Vaccines|CDC](#)
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Best Practices for Expired COVID-19 Vaccine

IDPH reminds providers to follow the best practices of regularly checking inventory for expired vaccines and removing expired inventory to prevent it from being administered. If the vaccine expires, remove it from the storage unit immediately to prevent staff from inadvertently using it.

Do not attempt to return the vaccine to the distributor. Instead, dispose of expired vaccine properly. Disposal must be done in accordance with local regulations with appropriate steps taken to ensure proper disposal. Dispose of expired vaccine vials (with remaining liquid) by placing them into the Sharps container and treating them as medical/biohazard waste. Do not draw up remaining liquid and dispose of it down the sink drain.

The CDC COVID-19 Vaccination Program Provider Agreement requires providers to report the number of doses wasted, unused, spoiled, or expired to IRIS. Healthcare providers can use the [Adjusting COVID-19 Vaccine Inventory for Wastage](#) instructions to account for wasted doses. IRIS staff are available to help manage IRIS inventory and capture vaccine wastage correctly by calling 800-374-3958.

COVID-19 Vaccine Shipping Cadence

The ordering cadence for Pfizer has changed from a 1-day to a 3-day window. IDPH orders COVID-19 vaccine on Thursdays. Pfizer ancillary kits are anticipated to arrive the following Monday and the vaccine delivery window is now Tuesday-Thursday.

Moderna and Johnson and Johnson COVID-19 vaccine may be delivered the following business day after IDPH places the order. CDC has stated to allow up to 2-3 business days for vaccine orders to arrive. Ancillary kits will arrive within a 24-hour window of the vaccine.

COVID-19 Vaccine Expiration Date Resources

Always be sure to check the manufacturer's website to obtain the most up-to-date expiration dates for COVID-19 vaccines. This is necessary for J&J vaccine as well as Moderna and Pfizer COVID-19 vaccines. It is important for healthcare providers to update vaccine expiration dates in IRIS. Questions regarding IRIS vaccine inventory and adjusting expirations dates can be directed to the IRIS Helpdesk at 800-374-3958.

For EUA COVID-19 vaccines that do not have a final expiration date, the CDC has set an expiration date of 12/31/2069 to serve as a placeholder date. Such vaccines have a dynamic expiration date, which can change over time as additional stability data become available. This placeholder date, which is far in the future, is intended to serve as a prompt for the provider to check the latest expiry information on the manufacturer's website. **It is important for healthcare providers to update vaccine expiration dates in IRIS.**

Janssen COVID-19 vaccine: The expiration date is NOT printed on the vaccine vial or carton. To determine the expiration date:

- Scan the QR code located on the outer carton, or
- Call 1-800-565-4008, or
- Go to www.vaxcheck.inj/

Moderna COVID-19 vaccine:

The expiration date is NOT printed on the vaccine vial or carton. To determine the expiration date:

- Scan the QR code located on the outer carton, or
- Go to www.modernatx.com/covid19vaccine-eua/

Pfizer COVID-19 vaccine: This vaccine product has an expiration date located on the vaccine vial.

CDC's [COVID-19 Vaccine Expiration Date Tracking Tool](#) can help providers keep track of the expiration date by lot number.

J&J/Janssen		Moderna		Pfizer	
Lot Number	Expiration	Lot Number	Expiration	Lot Number	Expiration
1821281	10/21/2021	043B21A	10/3/2021	EW0164	11/30/2021
1820096	10/21/2021	041B21A	10/4/2021	EW0167	11/30/2021
1821282	10/21/2021	042B21-2A	10/5/2021	EW0177	11/30/2021
1821286	10/21/2021	042B21A	10/5/2021	EW0186	11/30/2021
1821288	10/30/2021	044B21A	10/6/2021	EW0168	11/30/2021
1821287	10/30/2021	046B21A	10/6/2021	EW0185	11/30/2021
		045B21A	10/8/2021	EW0181	11/30/2021
		047B21A	10/9/2021	EW0171	11/30/2021
		048B21A	10/9/2021	EW0169	11/30/2021
		006C21A	10/10/2021	EW0180	11/30/2021
		049E21A	10/11/2021	EW0176	11/30/2021
		007C21A	10/12/2021	EW0187	11/30/2021
		001C21A	10/12/2021	EW0170	11/30/2021
		008C21A	10/13/2021	EW0179	11/30/2021
		050E21A	10/13/2021	EW0165	11/30/2021
		002C21A	10/14/2021	EW0172	11/30/2021
		009C21A	10/15/2021	EW0178	11/30/2021
				EW0175	11/30/2021
				EW0183	11/30/2021
				EW0173	11/30/2021
				EW0182	11/30/2021
				FD7220	11/30/2021
				FD7222	11/30/2021
				FF2591	11/30/2021
				FD7210	11/30/2021

COVID-19 Vaccine Access and Wastage Guidance

Take every opportunity to vaccinate every eligible person. As COVID-19 vaccine supply is more available, and opportunities to vaccinate Iowa residents may become more sporadic, focus should shift towards ensuring

vaccination of all eligible persons even at the risk of wasting unused doses. The Department supports and encourages efforts to administer vaccine to all eligible individuals and is providing updated guidance on [COVID-19 Vaccine Access and Wastage Guidance](#). The Department recommends every effort is made to vaccinate eligible persons who present at a vaccine clinic location. A multi-dose vial may be punctured to vaccinate one or more persons who present for vaccination. Ultimately, the remaining doses of vaccine in the vial may need to be wasted. At this point in Iowa's pandemic response, it is more critical to ensure people who want to be vaccinated are able to do so.

The CDC COVID-19 Vaccination Program Provider Agreement requires providers to report the number of doses wasted, unused, spoiled, or expired to IRIS. Healthcare providers can use the [Adjusting COVID-19 Vaccine Inventory for Wastage](#) instructions to account for wasted doses. IRIS staff are available to help manage IRIS inventory and capture vaccine wastage correctly by calling 800-374-3958.

Vaccinate with Confidence

Below are updated [resources](#) aimed at building confidence in COVID-19 vaccines.

- [How to Build COVID-19 Vaccine Confidence in the Workplace](#)
 - [Key Things to Know about COVID-19 Vaccines](#)
 - [Frequently Asked Questions about Vaccination](#)
 - [Vaccine Recipient Education](#)
 - [Vaccine Communication Toolkit for Medical Centers, Clinics, Pharmacies, and Clinicians](#)
 - **Ad Council:** [COVID-19 Collaborative Education Toolkit \(Healthcare Provider Resources\)](#)
 - **HHS:** [COVID-19 Public Education Campaign Resources](#)
 - **HHS:** [Talking Points for Health Care Leaders to Encourage Vaccine Confidence](#)
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COVID-19 Vaccine and Clinical Information

General information about COVID-19 vaccine products for clinicians and healthcare professionals can be found on the [COVID-19 Vaccination webpage](#).

Clinical information including FAQs, Contraindications and Precautions as well as Administrative resources can be found for each vaccine on their own product webpage.

- [Pfizer-BioNTech COVID-19 vaccine](#)
 - [Moderna COVID-19 vaccine](#)
 - [Janssen/J&J COVID-19 vaccine](#)
 - [COVID-19 Vaccine Quick Reference Guide](#)
 - [Interim Clinical Considerations Summary Document](#)
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V-Safe After Vaccination Health Checker

V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after an individual receives a COVID-19 vaccination. V-safe web pages feature information on how to register and complete a v-safe health check-in (including step-by-instructions with images), troubleshooting, FAQs, and contact information for technical support. These web pages will be continuously updated with additional resources.

- V-safe information sheet and poster: Posted on the Vaccine webpage and available in 5 languages: English, Spanish, Korean, Vietnamese, and Simplified Chinese

- [V-safe after vaccination health checker website](#)
- [V-Safe Print Resources](#)
- [Vaccine Adverse Event Reporting System \(VAERS\)](#)